Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	10/28/10	Address:	Yard of
Case #;	24F32044		<u>16883 Elm Rd.</u>
County:	Marshall		Tippecanoe, IN
Type of Laboratory Seizure (check one) Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location (c Residence Outbuilding Vehicle	theck all that apply) If the Implementation of the implementation is the implementation of the implementation
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): Backyard			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Corrosive Acid: Backyard			
Corrosive Base: Backyard			
Other (item and location): Oxidizer, Backyard			
Child under age 18 discovered (check one) ☐ Yes (number present) ☐ No *If yes, fax report to Child Protective Services		Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:Law Enforcement	
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Tippecanoe Twp. VID	Fax: <u>N/A</u>	026 0247
Health Dep	artment: <u>M</u> arsh <u>all Co.</u>	Fax: <u>(574)</u> Fax:	<u>930-9247</u>
Child Protection Service:			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Trp. Brandon McBrier</u> Phone <u>574-546-4900</u>			

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retontion.